PTO/SB/01 (10-00)

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DECLARATION	Attorney Doo	ket Number	MCP-5007		
AND POWER OF ATTORNEY		First Named Inventor SHUN-POR LI et al.			
FOR UTILITY OR DESIGN		COMPLETE IF KNOWN			
PATENT APPLICATION (37 CFR 1.63)  □ Declaration Submitted with □ Declaration Submitted a Initial Filing □ OR □ Initial Filing □ (Surcharge (37 CFR 1.16(e)) require		Application N	lumber		
		Filing Date			
	) required)	Group Art Ur	nit		
			ıme		
As a below named inventor, I hereby declare tha	t:				
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
BURST-RELEASE POLYMER COMPOSITION AND DOSAGE FORMS COMPRISING THE SAME (Title of the Invention)					
the specification of which					
is attached hereto					
OR					
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Country Number(s)		Filing Date D/YYYY)	Priority Not Claime	Certified Copy ed Attached? YES NO	
Additional foreign application numbers are liste					

DECLARATION - Utility or Design Patent Application					
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			
as the subject matter of each of the claims provided by the first paragraph of Title 35, Udefined in Title 37, Code of Federal Regula national or PCT international filing date of the	ited States Code, §120 of any United States of this application is not disclosed in the prior United States Code, §112, I acknowledge the tions, §1.56(a) which occurred between the his application:	r United States application in the manner e duty to disclose material information as filing date of the prior application and the			
Application Serial No.	Filing Date	Status			
10/393,765 09/966,509 09/966,497 09/967,414 09/966,450 09/966,939 PCT/US02/31129 PCTUS02/31117 PCTUS02/31062 PCT/US02/31024 PCT/US02/31163	3/21/2003 9/28/2001 9/28/2001 9/28/2001 9/28/2001 9/28/2002 9/28/2002 9/28/2002 9/28/2002 9/28/2002 9/28/2002	Pending			
I hereby appoint:		Place Customer			
		Number Bar Code Label Here			
AND					
Practitioner(s) named below:  Name  Registration Number					
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
Address all telephone calls to SHARON E. HAYNER at telephone number (732) 524-2242.					
Customer Number  Direct all correspondence to:					
Name:					
Address:					
Address:					
City:	State:	ZIP			
Country	Telephone:	Fax:			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SECOND INVENTOR:	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) SHUN-POR	Family N					
Inventor's Signature			Date			
Residence: City LANSDALE	State PA Co		ntry USA	Citizenship USA		
Mailing Address 1615 CLEARBROOK ROAD						
City LANSDALE	State PA	1	19446	Country USA		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF THIRD INVENTOR:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) DER-YANG  Family Name or Surname LEE						
Inventor's Signature  Date						
Residence: City FLEMINGTON	State NJ	Cou	ntry USA	Citizenship USA		
Mailing Address 10 KENTWORTH COURT						
City FLEMINGTON	State NJ	ZIP	08822	Country USA		

			knowla	dac c	re true and that	all statements made on	
I hereby declare that all statements m information and belief are believed to that willful false statements and the lik U.S.C. 1001 and that such willful false issued thereon.	be true; and iu	ruiei ui nuniet	at tilest	fine	r imprisonmen	t, or both, under 18	
NAME OF SECOND INVENTOR:	A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) FRANK J.	Family Na or Surnar						
Inventor's Signature					Date		
Residence: City QUAKERTOWN	State PA	\		Country	USA	CitizenshipUSA	
Mailing Address 750 E. CHERRY ROAD							
City QUAKERTOWN	State PA	١		ZIP 18	951	Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:		A peti	ition has t	een file	ed for this unsigne	d inventor	
Given Name (first and middle [if any]) JEN CHI		Family Na or Surnar					
Inventor's Signature					Date		
Residence: City MORRISVILLE	State P	Ά		Count	ry USA	Citizenship USA	
Mailing Address 80 ANNAMARIE DRIVE							
MODDICVILLE	State F	State PA		<b>ZIP</b> 19067		Country USA	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
	A petition has been filed for this unsigned inventor						
NAME OF THIRD INVENTOR:		☐ A pe	tition has	been fi	led for this unsign	ed inventor	
Given Name		A pe	Family or Surn	Name	led for this unsign	ed inventor	
Given Name (first and middle [if any]) HARRY S. Inventor's		A pe	Family	Name		ed inventor	
Given Name (first and middle [if any]) HARRY S. Inventor's Signature	State		Family	Name ame	SOWDEN	ed inventor  Citizenship USA	
Given Name (first and middle [if any]) HARRY S. Inventor's	State		Family	Name ame	SOWDEN Date		

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